



40th Anniversary Celebration and Reunion 7 April, 2018

REGISTRATION FORM

(Please print clearly)

Names (preferred names for name tags):

Adults: First name: Family name:
First name: Family name:
First name: Family name:
Children under 16.
.....

Contact details:

Postal address:
Email: Phone:

Dietary restrictions:

Accommodation:

- Free unpowered camp site SATURDAY night Yes [] No []
- Free bunk bed (bring your own linen. Pillows provided) Yes [] No []
 - Number of bunk beds: []
- Additional nights camping @ \$15 / night **Tick:** Thur [] Fri [] other []
- Due to a medical condition we require a powered camp site if possible []

Payment:

- Number of adults [.....] @ \$55 per adult. [\$]
- Number of children under 16 [.....] @ \$30 each [\$]
- Optional extra nights accommodation @ \$15 per night [\$]
- TOTAL** [\$]

Please accept my payment as below:

- [] **Direct deposit:** Bank: BSB 325 185 Acc: 03660412 Details: (your full name)
Bank Receipt number:
- [] **Cheque:** Make payable to Wagga Wagga Four Wheel Drive Club Inc.

Please pay when you register. Post your completed Registration Form to: Wagga Wagga Four Wheel Drive Club Inc. PO Box 5842, Wagga Wagga NSW 2650 or email to: secretary.wagga4wdc@gmail.com

The deadline to register and pay is January 31. 2018.